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# TELEGRAPHIC MESSAGE

NAME OF AGENCY DHEW/PHS/HSMHA/Regional Medical Programs Service		PRECEDENCE  ACTION:  INFO:	SECURITY CLASSIFICATION
ACCOUNTING CLASSIFICATION 3-3971015 75-30321 23.6J		DATE PREPARED 4-2-73	TYPE OF MESSAGE  <input type="checkbox"/> SINGLE <input type="checkbox"/> BOOK <input checked="" type="checkbox"/> MULTIPLE-ADDRESS
FOR INFORMATION CALL			
NAME Mrs. Sarah J. Silsbee (Writer)		PHONE NUMBER x31580	

THIS SPACE FOR USE OF COMMUNICATION UNIT

MESSAGE TO BE TRANSMITTED (Use double spacing and all capital letters)

TO:

NASRY MICHELEN, M.D.  
EXECUTIVE DIRECTOR  
DELAWARE REGIONAL MEDICAL PROGRAM  
5 REED STREET  
DOVER, DELAWARE

TO:

LEROY PIERRE, M.D.  
2401 PENNSYLVANIA AVENUE  
WILMINGTON, DELAWARE 19806

TO:

MR. CLYDE L. COUCHMAN  
PROGRAM DIRECTOR, RMP  
OFFICE OF THE REGIONAL HEALTH DIRECTOR  
DHEW REGION III  
3521-35 MARKET STREET  
P.O. BOX 13716  
PHILADELPHIA, PENNSYLVANIA 19101

THIS IS TO ADVISE YOU OF THE DECISIONS RESULTING FROM REVIEW OF  
THE PHASE-OUT PLANS SUBMITTED ON MARCH 15 BY THE DELAWARE REGIONAL  
MEDICAL PROGRAM. THE DECISIONS ARE AS FOLLOWS:

1. THE TERMINATION DATE FOR THE DELAWARE REGIONAL MEDICAL PROGRAM IS JUNE 30, 1973. THIS IS THE DATE BEYOND WHICH NO RMPs GRANT FUNDS MAY BE EXPENDED.
2. THE APPROVED DIRECT COST LEVEL IS \$183,748, PLUS APPROPRIATE INDIRECT COSTS. AN AMENDED AWARD WILL BE ISSUED FOR THE NEW APPROVED BUDGET PERIOD MAY 1, 1972 THROUGH JUNE 30, 1973.

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# GRAPHIC MESSAGE

FROM AGENCY		PRECEDENCE ACTION: INFO:	SECURITY CLASSIFICATION
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TO:

3. NO NEW ACTIVITIES MAY BE INITIATED. ALL ACTIVITIES NOW ONGOING, INCLUDING PREVIOUSLY CONTRACTED ACTIVITIES, MUST BE TERMINATED BETWEEN NOW AND JUNE 30, 1973, IN TIME TO ASSURE COMPLIANCE WITH CLOSE OUT REQUIREMENTS. EXPENDITURES FOR EQUIPMENT, CONSULTANTS, TRAVEL, AND MEETINGS SHOULD BE KEPT AT A MINIMUM FROM THIS POINT ON.

THE ABOVE INFORMATION IS NOT INTENDED TO BE AN ALL-INCLUSIVE RESPONSE TO YOUR PROPOSED PLANS FOR EQUIPMENT DISPOSAL, RECORDS RETENTION, USE OF GRANT-RELATED INCOME, ETC. RATHER, IT REPRESENTS OUR JUDGMENT ABOUT THE BASIC DECISIONS NEEDED TO ENABLE YOU TO INITIATE PHASE-OUT OPERATIONS AND NEGOTIATIONS.

WE EXPECT THAT YOU WILL HAVE QUESTIONS AND WE URGE YOU TO CALL THE GRANTS MANAGEMENT BRANCH (301/443-1800) FOR ASSISTANCE AS NEEDED. THE GRANTS MANAGEMENT STAFF WILL ALSO BE CONTACTING YOU REGARDING SPECIFIC DETAILS ON THE PHASE-OUT OF YOUR PROGRAM

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# TELEGRAPHIC MESSAGE

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TO:

AND THE FORMS TO BE PREPARED TO SUPPORT THE AMENDED AWARD  
NOTICE.

*Harold Margulies*  
HAROLD MARGULIES, M.D.  
DIRECTOR  
REGIONAL MEDICAL PROGRAMS SERVICE

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